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NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)

JAN 16 2008

(Please read the instructions before completing.)

COMMISSION
ON ETHICS

PERSONAL INFORMATION:

NAME: David W. Turner	LENGTH OF RESIDENCE IN NEVADA: 65 Years
ADDRESS: 6502 souoth McCarran Boulevard, Suite D, Reno, Nevada 89509	
CITY, STATE, ZIP: Reno, Nevada 89515	LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE (NRS 281A.620(1)(a)): 25 Years
TELEPHONE: (775) 823-3777	E-MAIL:

SECTION A (Public Office): List all public offices for which this financial disclosure statement is required [NRS 281A.620.1(g)] and check each box accordingly i.e. annual, candidate or appointment filing:

- **ANNUAL** all elected and appointed public officers (no later than Jan. 15 each year)
- **CANDIDATE** (no later than the 10th day after the last day to qualify as a candidate)
- **APPOINTMENT** to fill unexpired term of an elected or appointed public officer (within 30 days)

Public Office	Elected, Appointed or Appointed to Elective (E, A or A/E)	Annual Compensation	Term or Date Appointed	ANNUAL NRS 281A.600.1(b) 281A.610.1(b)	CANDIDATE NRS 281A.610.1(a)	APPOINTMENT NRS 281A.600.1(a)
Nevada Tax Commission	A	\$ 20,000.00	11/01/04	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
		\$		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		\$		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION B (Sources of Income): List each source of your income (including any source listed in Section A), or that of any member of your household who is 18 years of age or older. [NRS 281A.620.1(b)]:

	Self	Household Member
See Statement 1	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

SECTION C (Real Property): List specific location and particular use of all real estate (other than personal residence): (1) in which you or a member of your household has a legal or beneficial interest; (2) the fair market value of which is \$2,500 or more; and (3) located in this state or an adjacent state [NRS 281A.620.1(c)]:

Specific Location	Particular Use
None	

David W. Turner

Print Name of Public Officer

SECTION D (Creditors): List each creditor to whom you or a member of your household owes \$5,000 or more [EXCEPT: (1) debt secured by mortgage or deed of trust on real property which is not required to be listed in Section C above; and (2) debt for which a security interest in a motor vehicle for personal use was retained by seller] [NRS 281A.620.1(d)]:

	Self	Household Member
Clyde T. Turner	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

SECTION E (Gifts): List the identity of donor and value of each gift of all gifts received in excess of an aggregate value of \$200 from a donor during the preceding taxable year [EXCEPT: (1) a gift received from a person who is related to you within the third degree of consanguinity or affinity; and (2) ceremonial gifts received for a birthday, wedding, anniversary, holiday or other ceremonial occasion if the donor does not have a substantial interest in your legislative, administrative, or political action] [NRS 281A.620.1(e)]:

<u>Donor</u>	<u>Gift</u>	<u>Value of Gift</u>
		\$
None		\$
		\$
		\$

SECTION F (Business Entities): List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner in whole or in part, limited or general partner, or holder of a class of stock or security representing 1% or more of the total outstanding stock or securities issued by the business entity [NRS 281A.620.1(f)]:

	Self	Household Member
	<input type="checkbox"/>	<input type="checkbox"/>
See Statement 2	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.

Date: 01/09/2008

Signature:



Print name: David W. Turner

FILE COMPLETED FORM WITH:

Appointed Public Officers

Nevada Commission on Ethics
3476 Executive Pointe Way, Suite 10
Carson City, Nevada 89706
775.687.5469 • 775.687.1279 fax

Elected Public Officers and Candidates for Public Office

Nevada Secretary of State, Elections Division
101 North Carson Street, Suite 3
Carson City, Nevada 89701
775.684.5705 • 775.684.5718 fax

DAVID W. TURNER
STATEMENT OF FINANCIAL DISCLOSURE
STATEMENT 1

R E C E I V E D

JAN 16 2008

COMMISSION
ON ETHICS

Sources of Income:

<u>SOURCE</u>	<u>WHOSE</u>
AICPA Insurance Trust	Self
Bank of America	Self
Prudential Financial Services	Self
State of Nevada	Self
The Artful Hand (a sole proprietorship)	Spouse
Turner, Loy & Co., LLC	Self

DAVID W. TURNER
STATEMENT OF FINANCIAL DISCLOSURE
STATEMENT 2

R E C E I V E D

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Business entities involved as an owner, beneficiary, director or officer:

	<u>WHO</u>
Jenni Life Insurance Trust	Self
JLMCG Properties, LLC	Self
The Artful Hand, (a sole proprietorship)	Spouse
The Kennedy Foundation	Self
The Marguerite Peterson Foundation	Self
Turner, Loy & Co., LLC	Self
William A Eklund Trust	Self